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NO. 1141 P. 1/1

TO: ISSUE FEE

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OCT 23 2006

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7590 08/03/2006

FROST BROWN TODD LLC
2200 PNC Center
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Shari Lipari	(Depositor's name)
<i>Shari L</i>	(Signature)
10-23-06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/676,288	10/01/2003	Randal T. Bynum	ENDSUBS-0515150	7075

TITLE OF INVENTION: GASTRIC BAND INTRODUCTION DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/03/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS				
MENDOZA, MICHAEL G	3734	606-157000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 Dean L. Garner
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Reel/Frame: 015889/0074

Cincinnati, OH

ETHICON ENDO-SURGERY, INC.

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *[Signature]*Date OCTOBER 23, 2006Typed or printed name Joseph F. ShirtzRegistration No. 31,880

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